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Bib Data Sheet

CONFIRMATION NO. 9211

SERIAL NUMBER 10/789,313	FILING DATE 02/27/2004  RULE	CLASS 280	GROUP ART UNIT 3618	ATTORNEY DOCKET NO.
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APPLICANTS

Terry Swanson, Plattsmouth, NE; *TS*

Larry Swanson, Plattsmouth, NE; *LS*

\*\* CONTINUING DATA \*\*\*\*\*

*n/a* *ck*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*n/a* *ck*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 05/18/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NE	SHEETS DRAWING 4	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged <i>Adam H. Jacobs</i> Examiner's Signature	Initials <i>ck</i>		

ADDRESS

Law Offices of Adam H. Jacobs  
 Suite 726  
 1904 Farnam Street  
 Omaha , NE  
 68102

TITLE

Plastic basket shopping cart

FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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